

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

OFFICIAL

OMB No. 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State/Territory: WISCONSIN

Citation As a condition for receipt of Federal funds under title XIX of
the Social Security Act, the

42 CFR
430.10

Department of Health and Family Services
(Single State Agency)

submits the following State plan for the medical assistance
program, and hereby agrees to administer the program in
accordance with the provisions of this State plan, the
requirements of titles XI and XIX of the Act, and all
applicable Federal regulations and other official insurances
of the Department.

TN No. 96-024
Supersedes
TN No. 91-0022

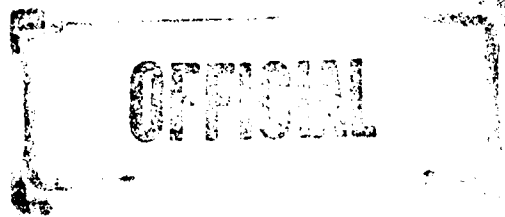
Approval Date

DEC 04 1996

Effective Date 7/1/96

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May 22, 1980

State Wisconsin

SECTION 1 SINGLE STATE AGENCY ORGANIZATION

Citation

42 CFR 431.10
AT-79-29

1.1 Designation and Authority

(a) The _____

Department of Health and Family Services is the single State agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named in this paragraph.)

ATTACHMENT 1.1-A is a certification signed by the State Attorney General identifying the single State agency and citing the legal authority under which it administers or supervises administration of the program.

DEC 04 1996

Approval Date _____

Effective Date 7/1/96